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CONFIRMATION NO. 7511

Bib Data Sheet

SERIAL NUMBER 10/527,975	FILING OR 371(c) DATE 03/15/2005 RULE	CLASS 530	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. P70484US0
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**APPLICANTS**

Helene Le Buannec, Paris, FRANCE;  
 Paul Cohen, Paris, FRANCE;  
 Gabriel Peltre, Paris, FRANCE;  
 Daniel Zagury, Paris, FRANCE;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/FR03/02733 09/16/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

FRANCE 0211455 09/16/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 12	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

00136

**TITLE**

Stable immunogenic product comprising antigenic heterocomplexes

FILING FEE RECEIVED 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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